2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2005
Secretary of State

DOCUMENT# K40509

Entity Name: PERSONAL BODY TRAINERS, INC.

Current Principal Place of Business:

C/O SANDY A. LEVITT
950 PINTO CIRCLE
NOKOMIS, FL 34275 US

New Principal Place of Business:

Current Mailing Address:

C/O SANDY A. LEVITT
950 PINTO CIRCLE
NOKOMIS, FL 34275 US

New Mailing Address:

FEI Number: 65-0076443 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LEVITT, SANDY A.
2201 RINGLING BLVD., #203
SUITE 112-C
SARASOTA, FL 34237 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete
Name: PROCTOR, ANGIE T
Address: 950 PINTO CIRCLE
City-St-Zip: NOKOMIS, FL

Title: V ( ) Delete
Name: SEE, JULIA
Address: 410 PALMETTO CT #9
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANGIE PROCTOR DPS 03/28/2005

Electronic Signature of Signing Officer or Director Date